2 of 2

PTO/SB/06 (12-04)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

<u></u>	Under the Pape	rwork Red	luction Act	of 1995	no per	sons are re	Baulined to mesn	) of boo	U.S. Patent and	Trademark O	ffice; U.S	B. DEPARTMENT	OF COMMERC		
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB of PATENT APPLICATION FEE DETERMINATION RECORD  Application or Docket N										B control number					
Substitute for Form PTO-875											Application or Docket Number				
1 1 402 134												24			
APPLICATION AS FILED - PART I										OTHER THAN					
(Column 1) (Column 2)									SMAL	L ENTITY	OR	SMAL	L ENTITY		
NUMBER FILED NUMBER EXTRA								- 1	DATE (A)		٦		T		
(3	ASIC FEE 7 CFR 1.16(a), (b)	or (c))						7	RATE (\$)	FEE (\$)	$\overline{}$	RATE (\$)	FEE (\$)		
(37 CFR 1.16(a), (b), or (c)) SEARCH FEE								4		/					
	7 CFR 1.16(k), (i), (										ł				
(8)	(AMINATION FE 7 CFR 1.16(0), (p),	or (a))						7		<del>  /-</del>	-				
TC	TAL CLAIMS	- ` ''	20		ਿ			-		1/	_				
	CFR 1.16(1)) DEPENDENT C		<u>80</u>	minus	297 =	•			x ≖	· V .	OR	х . =			
(37	CFR 1.16(h))	LAIMS	7	minu	s 7 =		/	7	u /	1	┨ ँ	<del>  ^</del>	<del></del>		
			If the spe	ecification	on and	drawings	exceed 100	$\dashv$	×	<del></del>	4	X =	. [		
AF FE	PLICATION SIZ		sueets o	t paper,	the an	plication	size foe due			1	1.				
	CFR 1.16(s))	1	IS \$250 (	\$125 fo	r smail	entity) for	r each hereof. See		/	1	1	l	1 .		
			35 U.S.C	. 41(a)	ອຍເຮັດເ 1)(G) ຄ	naction t and 37 Ci	nereof. See R 1.16(s).			i		1	1		
MŁ	LTIPLE DEPEN				<del>/</del>	<del></del>	4	<u> </u>							
		DENT CE	AIM PRES	SEN1 (37	CFR 1.	16(J))		ا ل							
* If the difference in column 1 is less than zero, enter "0" in column 2.											1	<u> </u>	<del> </del>		
									TOTAL	L	J	TOTAL	L		
	APF	LICATI	ON AS A	AMENI	DED -	PARTI	l				•				
		(Colu	mn 1)		"							07145			
_	T	<del></del>	AIMS			olumn 2)	(Column 3)		SMALL	ENTITY	OR	OTHE	R THAN ENTITY		
⋖	Malad	REMAINI AFTER AMENDM		HIGHE NUMB				11	RATE (\$)	ADDI 4	1		<del></del>		
누	1910					VIOUSLY		П		TIONAL		' RATE (\$)	ADDI-		
卣	Total (37 CFR 1.16())	*-		<del></del>		PAID FOR	<del>                                      </del>	1		FEE (\$)			TIONAL FEE (\$)		
AMENDMENT A	Independent	100	AU.	Minus		4 AV	<del>                                     </del>	J L	<u> </u>		OR	X =			
	(37 CFR 1.16(h))			.Minus		NO.	= /		x (=/						
A.M	Application Siz	(s))			·	1 h	~ 7	-	OR	X =					
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(I))														
					LITT OD	31VI (37 CF	K 1.16(j))		/		OR		1		
									TOTAL ADD'L FEE		٠,	TOTAL			
		(Colum	nn 1)		<b></b>				MODELLE		OR	ADD'L FEE			
$\Box$		CLA				olumn 2) HEST	(Column 3)			·	_		1		
<u> </u>		REMA AFT			NU	MBER	PRESENT		RATE(\$)	ADDI-	ſ				
닔		AMEND	MENT			IOUSLY FOR	EXTRA			TIONAL	l	RATE (\$)	ADDI- TIONAL		
삙	Total (37 CFR 1.16(i))	*		Minus	**		2	-		FEE (\$)	- 1		FEE (\$)		
尌	Independent	•		Minus	***			12	< =		OR	x =			
AMENDME	(37 CFR 1.16(h))		1			- 1	±	,	· =		[				
⋛ŀ	Application Size	Fee (37	CFR 1.16(	s))				<b> </b>			OR .	× =			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))										ŀ	<del> </del> -				
						(=, 0, 1		L			OR				
TOTAL ADDITION OF									OR -	TOTAL					
•	If the entry in co	olumn 1 is	less than t	lhe entry	in colur	nn 2 write	"O" in notion - 1		DD'L FEE		OI (	ADD'L FEE	j		
***	If the "Highest N If the "Highest N	lumber Pr	eviously P	ald For	IN THIS	SPACE IS	less than 20,	enter *	20".	- <del>-</del>		_			
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20",  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the constraint.															

This collection of information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case: Any comments and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

<u> </u>	of	2	) 	
<b>DETER</b> M mber 29,	IINATION REC	CORD	Application or D	ocket Number 4/65273

PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999  652734												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								LL (	ENTITY	OR	OTHER SMALL	
FC	DR	NUMBE	NUMBER FILED		NUMBER EXTRA		RAT	E	FEE	2	RATE	FEE
ВА	SIC FEE								345.00	$\sim$ 1		690.00
TO	TAL CLAIMS	8	55 minus 20=			· 35		9=	315°W	OR	X\$18=	
IND	EPENDENT CLAIMS	. 6	5 minus 3 =		: 2		X39	)= -	₹8. <sup>∞</sup>	OR	X78= .	
MU	LTIPLE DEPENDEN	T CLAIM PI	RESENT		· · · · · ·		+13	)=		OR	+260=	
* If	* If the difference in column 1 is less than zero, enter "0" in column 2								738° <sup>U</sup>	OR	TOTAL	
B	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							OTHER TO SMALL ENTITY OR SMALL EN				
AMENDMENT A	RE	CLAIMS MAINING AFTER ENDMENT	P		IGHEST UMBER EVIOUSLY AID FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total •	76	Minus	. 55		= a/	X\$ 9	)=	189	OR	X\$18=	
	Independent •	Z TON OF M	Minus	***	J.	- کم	X29	秒	94	OR	X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								)=  -	0	OR	+260=	
								TAL FEE	27.3	OR	TOTAL ADDIT, FEE	
U	12003 100	olumn 1)			olumn 2)	(Column 3)	7.5511.		70			
NDMENT B	RE	CLAIMS MAINING AFTER ENDMENT		PRE	IGHEST UMBER EVIOUSLY AID FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total •	<u> 80</u>	Minus	**	16	= 4	X\$ 9	)=	36	OR	X\$18=	
AME	Independent • FIRST PRESENTAT	ION OF MI	Minus	***	AIT CLAIM	=	X39	=		OR	X78=	
	FINOT FREDERIKE	ION OF IM	CHPLE DEF	CNDC	IN ODAIN		+130	)=	•	OR	+260=	
_	11103						TO ADDIT.	TAL	.36	OR	TOTAL ADDIT. FEE	
• 🗸	(Co	olumn 1) Claims			lumn 2) Ghest	(Column 3)	·.					
AMENDMENT C	RE	MAINING AFTER ENDMENT )		NI PRE	UMBER EVIOUSLY NID FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FÆE	ì	RATE	ADDI- TIONAL FEE
	Total	MM	Minus	•• _	ane	= /.	X\$ 9	<b>=</b> ·	7	OR	X\$18=	
	Independent 5	W 05 M	Minus	•••	747 61 4114	= '	X39	<b>7</b>		OR	X78=	
	FIRST PRESENTAT	ION OF ML	ILTIPLE DEP	ENDE	NI CLAIM		+150	_		OR	+260=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											